CREW:	62 WORK ORDER TYPE: PM REPAIR		02-53663-80			ISSUE DATE 01/06/11	Page 1 Of 1				
Originator : KEVIN MILLER Schedule Date Planner : KEVIN MILLER Priority Drawing No : 1CCE-M2014 Clearance Equip No/Cat: 1CCE-A 1 Tag Request		: : 3C			Date Completed:		Failure Code:				
		: NO			Completed By :	Signature :					
Project ID : Text ID Shutdown : N No Shutdown Frequency			: : NOT SCHEDULED : No Reading			Accepted By :		Signature :			
						** Record Time Daily ** Del			P=Plan Delays		
Step	Job S					nd Additional	Information	Emp No	Date	Hours	Code/Hrs
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\*\* IMPORTANT NOTICE \*\*

YOU ARE RESPONSIBLE FOR YOUR OWN SAFETY AND MUST ENSURE THAT THE REQUIRED PPE IS WORN FOR EVERY JOB YOU ARE DOING. IF YOU HAVE ANY QUESTIONS CONCERNING THE WORK RULES, SAFETY CODES, OR REQUIRED PPE, PLEASE CONTACT YOUR SUPERVISOR.

Job Feedback/Historical Notes:

